

Moskowitz: Collaborative can make S.C. a leader in medical education

Published in *The State* on January 5, 2011

South Carolina has been creative and innovative in addressing health care during the past decade and, as a result, is making tremendous strides. A new report from the U.S. Department of Health and Human Services names South Carolina one of the top five states in the nation for health-care quality improvement.

What is driving our success? Two words: trust and collaboration.

South Carolina is the only state in which all the major research-intensive universities and largest teaching hospital systems have joined forces to use collaborative research to improve patient care. Our university and hospital leaders came together in 2004 to start this unique collaborative — Health Sciences South Carolina, a national model. Each of our members — Clemson University, the Medical University of South Carolina, the University of South Carolina, Greenville Hospital System University Medical Center, Palmetto Health, Spartanburg Regional Healthcare System, Self Regional Healthcare, McLeod Hospital System and AnMed Health — is cooperating to improve our state's health status.

By every indicator, the collaborative is working. Immediately after it was created, two of our Centers of Economic Excellence caught the attention of the Duke Endowment and attracted \$21 million in out-of-state funding. In the current fiscal year alone, we have attracted another \$10.4 million in federal research grants.

We have developed a highly successful research enterprise through a model dependent on trust, collaboration, cooperation and communication. Now, it makes sense to extend that model to medical education, so South Carolina can achieve national leadership in this area.

Collaboration already is yielding strong results in medical education in our state. Earlier this year, Spartanburg Regional Healthcare System and Wofford College announced a partnership on a new osteopathic medical campus. USC and its 30-year partner Palmetto Health are exploring opportunities to increase the capacity of the USC School of Medicine in Columbia.

Another collaborative venture and a logical next step is USC's proposed expansion of its program on the Greenville Hospital System campus. The nearly 20-year affiliation between USC and Greenville Hospital System has set a strong foundation for medical education in the Upstate. The hospital system has pledged

nearly \$81 million to fund USC's expansion, and this partnership can have a major positive impact on health-care delivery statewide.

Hospital-university collaboration on medical education makes sense for several reasons. First, it will expand capacity to ensure we have enough primary-care physicians to care for the state's growing and aging population. With South Carolina gaining popularity as a retirement destination and baby boomers aging, the Census Bureau projects that by the year 2030, the state's 65-and-over population will be nearly double what it was in 2000. We must be ready.

Having enough physicians becomes an even greater need in light of the federal health-care law. More people will have access to health care, and it is inevitable that we will have a greater demand for it. It is our responsibility to anticipate the health-care needs of our urban and rural communities and address them since the present models of medical education will change. Let's put South Carolina at the vanguard of the medical education component of health-care reform.

Second, by increasing hospital-university collaboration in medical education, we can better address some of the health-care challenges facing our state and our nation. We can increase efficiencies in a time of limited resources and draw on the tremendous strengths of our individual universities and hospitals. We can work together to develop a convincing case to the entities that approve, fund and accredit medical residencies. And by gaining additional residency slots, we can increase the quality of our students' educational experiences and convince more S.C.-trained physicians to stay in our state.

Finally, through a collaborative approach, we can help ensure we have high-quality medical care and physicians available in every part of the state. Getting many partners involved will help us put regionalism aside and recognize that when one part of our state becomes stronger, the whole state does. Bringing partners together is a work in progress. Strong bonds already exist among Clemson, MUSC and USC. I am confident that the collaborative and cooperative effort of all the collaborative members, each of which is dedicated to improving the health of South Carolina's population, will be successful.

Health Sciences South Carolina offers a commitment to bringing its members together to develop a strategic medical education action plan for South Carolina. We believe that if Durham can bill itself as the "City of Medicine," then we can make South Carolina the "State of Medical Education."